Gahanna Spring Break Camp 2015

City of Gahanna Department of Parks & Recreation

200 S. Hamilton Road, Gahanna, Ohio 43230

Parent or Guardian First Name	Last Name:				
Address:					
City: State		Zip:	Email: _		
Resident Non-Resident	_ Home Phone	e:	Daytime P	hone:	
Camper's Name		Birth Date	T-shirt	Size Circle: Youth OR Adult	
ALL FORMS MUST		PLETED &	_	EFORE YOUR CHILD	
This includes:					
 Registration Form (this form) Health History Form on CampDoc.com including: Immunization Record Pick Up Authorization Copy of Insurance Card (FRONT & BACK) 		•	This f		
Policy Acknowledgemen I have received a copy of the lined policies and procedures Parent/Guardian Signature:	respective 201 s wherein.			-	
Payment Method	·			.	
☐ Cash ☐ Money Orde ☐ Credit Card - Full payment Please bill my credit card (circle		☐ Credit Card	- ,	ee attached for more details)	
Printed name as it appears on card		Ассои	nt Number	Expiration Date	
Signature of Cardholder	·	_			

Gahanna Spring Break Camp 2015 Refund and Credit Policy

ABSOLUTELY <u>NO</u> CREDITS, REFUNDS, OR TRANSFERS WILL BE ISSUED FOR CUSTOMER REQUESTED CANCELLATIONS AFTER MARCH 27, 2015.

Gahanna does not offer customer-requested refunds for any programs, including Camp. Customer requested cancellations or transfers received on or before March 27, 2015 will receive department household credit only.

- Credits expire one year from the date issued.
- Customers using a household balance to register for a program will forfeit their credit, if they choose to unenroll in the program.

All customer requested cancellations and changes are subject to a \$25 administrative fee.

- This includes transferring from one week of camp to another.
- If changes to registration are made more than one time, multiple administrative fees will apply.

Absolutely no credits or transfers will be issued for customer requested cancellations after March 27, 2015.

• This includes missing any portion of camp due to vacation, schedule conflict, or any non-emergency situation.

Refunds or credits for hardship and emergency situations must be requested by letter to the Department Director.

- Hardship situations are defined as a job transfer of 25 miles or more away or serious medical condition. Requests must be accompanied by proof and should be presented within 2 weeks of first occurrence impacting camp attendance.
- *Emergency situations* are defined as camper illness, injury, or medical emergency. Requests must be accompanied by proof and should be presented no less than one week prior to affecting camp attendance.

Policy Acknowledgement	•••••
I have read, understand, and agree to the Gahanna Spring Break Ca Credit Policy.	amp 2015 Refund and
Parent/Guardian Signature:	Date:

The 2015 Gahanna Spring Break Camp Experience

Camper Name:

Camp Name	Regular Rate	Monday	Tuesday	Wednesday	Thursday	Friday	5 Day	Total Cost
Spring	RDR: \$40/day	April 6 141401A	April 7 141401B	April 8 141401C	April 9 141401D	April 10 141401E	5 day 141401F	
Break Clark Hall	SR: \$50/day							
7am-6pm Ages 5-12	5 day: \$165/\$180							